

## Provider Communication

<b>Subject:</b> Skilled Nursing Facility Medicare Crossover Claims Paid at Percentage Pricing	<b>Priority:</b> <b>High</b>
<b>Date:</b> March 15, 2010	<b>Message ID:</b> ACSBNR03152010_1

***Dear Skilled Nursing Facility Provider,***

As a result of a recent audit of the Department of Community Health (DCH), Skilled Nursing Facility Medicare crossover claims received by DCH were identified to have paid using the incorrect reimbursement calculation. The reimbursement amounts should have been calculated using the provider specific per diem rate with the number of days rather than a percentage calculation. DCH must address and correct the erroneous payment of those claims. DCH will mass reprocess those claims that paid with the incorrect reimbursement calculation.

Mass reprocessed claims appear on the remittance advice in the special “Adjusted Claims” section following paid and denied original claims. As with original claims, adjusted claims are categorized as “Adjusted Claims – Paid” and “Adjusted Claims – Denied.” Mass adjusted claims appear with the number four (4) in the first position of the claim TCN (transaction control number)

If you have any questions regarding this mass reprocessing, please contact the Customer Interaction Center by calling 800-766-4456 (toll free), or your ACS representative at [www.ghp.georgia.gov](http://www.ghp.georgia.gov).

Thank you for your continued participation in the Georgia Medicaid Program.